

ANNUAL REPORT

UPON THE

Public Health and Sanitary Condition

OF THE

TADCASTER RURAL DISTRICT

FOR THE YEAR 1903.

BY

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TADCASTER RURAL DISTRICT COUNCIL.

❧ **ANNUAL REPORT** ❧

UPON THE

Public Health and Sanitary Condition for 1903.

GENTLEMEN,

I have pleasure in again presenting my Annual Report upon the state of the Public Health and Sanitary Condition of the Tadcaster Rural District.

During the year 1903 the general health of the district has been good, the death rate being the lowest for the last ten years.

An exceptionally large number of cases of scarlet fever have occurred, details of which are given in the report.

Although much work still requires to be done to bring the sanitary condition of some of the larger villages into a satisfactory state, yet this is proceeding into two most important directions, viz., water supply and sewerage.

Last year I remarked upon the unsatisfactory manner in which the scavenging is performed in some of those places where it is done by contract. Much of the Sanitary Inspector's time is taken up in supervising this work, and they have frequently to complain to the Council in order to get it carried out. In more than one instance during the year they have been compelled to get the scavenging done and charge the contractor with the expense. I am confident that this most important work could be done more efficiently if the Council would employ their own workmen for its performance.

The accumulation of large quantities of refuse of containing decomposing vegetable and animal matter in the ashpits, which are generally within a few feet of the back of the house, cannot fail to have an injurious effect upon the health of the inhabitants.

The bye-laws for new buildings have now been published and will doubtless prove beneficial to those places in which they are applicable.

POPULATION.

The estimated population to the middle of the year is 30,500. The number of inhabited houses at the Census in 1901 was 6,169, and the average number of persons per house 4·7. A considerable number of new houses have been erected in Crossgates during the year, and plans have been approved for the laying out of new streets both in Garforth and Kippax. There is every reason to believe that in these portions of the district the population will continue to increase.

	Population.		
Aberford Sub-district	...	...	20,000
Tadcaster	„	...	6,600
Sherburn	„	...	3,900
Allerton Bywater Parish	...	...	3,760
Garforth Parish	...	...	3,380
Kippax	„	...	3,360
Barwick	„	...	3,150
Tadcaster	„	...	3,090

BIRTHS.

983 Births have been registered; the birth rate is thus 32·2. This is slightly below the average, but is one per thousand higher than last year.

It will be seen from the table below that it is chiefly owing to the very low birth rates in the Barwick and Tadcaster Parishes that the rate for the whole district is not higher.

DEATHS.

466 Deaths occurred during the year. Of these, four were persons not belonging to the district, who died in the Sherburn Small-pox Hospital, and eighteen persons belonging to the district died in public institutions outside, principally the Leeds Infirmary and York Hospital. After allowing for these the death rate is 15·7. This is highly satisfactory, being 1·5 below the average for the last eight years. The highest death rates are seen from the table below to have been at South Milford and Tadcaster. In the latter case this is due to the number of old persons who have died during the year.

				Death Rate		
				Birth Rate.	Death Rate.	in 1902.
Tadcaster Rural District				... 32·2	... 15·7	... 15·9
Aberford Sub-district				... 34·6	... 15·0	... 15·8
Tadcaster „				... 24·7	... 16·3	... 16·1
Sherburn „				... 32·8	... 18·4	... 16·5
Barwick Parish ...				... 22·0	... 14·0	... 13·9
Allerton „ ...				... 42·2	... 15·9	... 21·6
Kippax „ ...				... 40·0	... 14·0	... 16·0
Garforth „ ...				... 36·4	... 16·5	... 18·0
Tadcaster „ ...				... 26·8	... 19·4	... 20·5
Sherburn „ ...				... 33·1	... 16·0	... 11·8
Micklefield „ ...				... 40·7	... 16·5	... 11·2
South Milford Parish				... 40·2	... 20·5	

INFANTILE MORTALITY.

Deaths of children under 1 year of age to every thousand births; the rate is 128. This is somewhat lower than last year and well below the average.

It is due to the absence of any serious epidemic of whooping cough or measles. It will be seen on referring to Table IV. at the end of the report that the deaths from diarrhœa were not excessive, and in only two other cases under 1 year of age were the deaths due to infectious disease, both being from whooping cough.

ZYMOTIC DEATH RATE.

32 Deaths from Zymotic Disease have been recorded. They were 1 from small-pox, 10 from scarlet fever, 5 from whooping cough, 5 from typhoid fever, and 11 from diarrhœa. The zymotic death rate is 1·0 for the year. The average rate for the last 5 years is 1·9.

INFECTIOUS DISEASES.

371 Cases have been notified. This is nearly double that of 1902, and is entirely due to the serious outbreak of scarlet fever, which has been prevalent in various parts of the Aberford Sub-district all through the year. Below is given a table of the principal infectious diseases notified during 1903 and the previous four years, and also the number of cases treated in the Garforth Hospital:

	1903.	1902.	1901.	1900.	1899.
Small-pox	4	2	0	0	0
Scarlet Fever	308	79	146	29	113
Typhoid	33	51	58	25	37
Diphtheria and Membranous Croup	6	26	5	11	15
Cases treated in Garforth Hospital ...	201	88	116	29	72

SMALL-POX.

Four cases have been notified. The first was at Micklefield in March. The patient, a young woman, had been living in Leeds until a few days before the illness commenced. A fortnight previously she had visited a friend who was ill, this illness proving to be a case of small-pox. The next case occurred in May at Garforth. The source of infection could not be traced, but the patient, a young man, was in the habit of frequently going to Leeds, and he may have contracted it there.

These two cases were moderately severe.

The third case was at Sherburn, and was supposed to have been contracted from the small-pox hospital. The young man had on several occasions taken the milk for the hospital (a duty which was usually performed by his brother), but had never been beyond the gate at the entrance to the hospital grounds. The attack was a severe one.

The last case was from Garforth in June, the patient being a man of 47.

The source of infection in this instance was very obscure. The only time he had been out of Garforth during the month preceding his illness was on one occasion when he drove with some friends to Boston Spa. None of the others present on this occasion developed the disease, and there was nothing to suggest that he contracted the complaint at this time, nor were there any known cases in Garforth. The illness was very severe and proved fatal after he had been in hospital a few days. In none of the above instances had the persons been re-vaccinated.

They were all removed to the Sherburn Hospital as soon as the disease was recognised.

Persons known to have been in contact with them were immediately re-vaccinated and articles of clothing, etc., likely to retain infection, and which could not be rendered innocuous by boiling, were burnt, and compensation given by the Council.

The rooms which the patients occupied were thoroughly disinfected, and visits were paid to the houses during the ensuing fortnight to see if any of the inmates were likely to be developing the disease.

Fortunately in no instance did infection spread beyond the first case, and I think that this speaks volumes for the protective influence of vaccination. In one of the above cases a brother had slept with the patient each night until his removal to hospital, at which time the rash was well developed.

The incubation period (that is the time which elapses between infection and commencement of symptoms) of small-pox is 12 days. Vaccination may therefore modify or arrest the attack if performed within 5 or 6 days after the person is infected.

SHERBURN HOSPITAL.

As this, the Joint Selby, Tadcaster, and Pontefract Small-pox Hospital, is in the Tadcaster Rural District it may not be out of place to give a brief account of the work which has been done during the year.

The hospital buildings were completed in January and caretakers appointed. On January 31st the first case was admitted from Pontefract Workhouse, and a week later one from Selby Workhouse. The numbers kept increasing until in June the male ward was full, and several women occupied the remaining one. The Committee then purchased a tent capable of holding twelve beds. In July twenty patients were in the hospital at one time. Thirty-five cases have been admitted altogether during the year—four being from Tadcaster, six from Selby, and the remaining twenty-three from the Pontefract

districts. Five patients died in the hospital. Every precaution was taken to prevent the spread of infection from the burials. These took place in the early morning, the ambulance being used to convey the coffin to the churchyard, and the hospital staff did the work instead of running the risk of employing an undertaker.

Of the total 35 patients only two had been re-vaccinated, and both had the disease in so slight a form as to be almost unrecognisable.

The drainage of the hospital flows into a water-tight cesspool, and is then pumped into trenches dug along the ground, which is cultivated. All provisions and letters are left by the tradesmen in a box at the gate, from whence they are conveyed by the caretakers to the hospital.

SCARLET FEVER.

308 Cases have been notified. This is the largest number that I can find recorded in any previous year, the only approach to it being in 1898, when 220 cases occurred.

The disease has been almost entirely confined to the mining areas, and, as is common in these thickly populated villages, two, three, or in many cases more children have been infected in the same house.

Of the total number notified 295 have been in the Aberford division of the district.

An epidemic commenced at Garforth in February. As almost all the children attacked had been attending the parish school, I thought probably one or more unrecognised cases were still attending, and causing spread of the disease. On February 23rd I recommended closure of this school for four weeks. This was followed by an almost immediate reduction in the cases notified, and although a few other cases have occurred throughout the year, the epidemic may be said to have ceased with closure of the school.

At Micklefield cases have been reported all through the year, although never in sufficient number to constitute an epidemic. Kippax has been visited in a similar manner. A few cases occurred at Aberford during the summer. In November the number was sufficient to constitute an epidemic. As the disease was spreading, and we had no further accommodation at the hospital, I recommended closure of the school for four weeks, and at the end of this period, as a number of cases still existed, I extended the closure for another fortnight.

The largest outbreak has been in the Allerton Bywater Parish, the parts affected being entirely those known as Hollinghurst and Bower's Row. The first cases occurred in May, and the epidemic lasted until September, when over fifty cases had been reported from this small area alone.

No doubt the great majority of these cases have resulted from insufficient isolation of children treated at home, owing to the hospital being full. In some instances this is due to carelessness in allowing the patient to mix with other children as soon as the acute stage has passed and whilst peeling is going on.

In a large number of cases anything like satisfactory isolation is impossible in their own homes. When one considers that many of these people have five or six children, generally including a baby, and, as a rule only two bedrooms, it can scarcely be expected that the infected child will be kept in a separate room for six weeks.

The only remedy is to increase the hospital accommodation, for it is only by isolation of the earliest cases in hospital that one can reasonably hope to prevent an epidemic in a thickly populated neighbourhood. At the time of the Allerton epidemic the hospital was almost full when the first cases occurred, and although a large proportion of the children were eventually admitted they often had to remain at home a week or more until beds were vacant. This epidemic was evidently not spread by means of the schools, for although the children from Great Preston attend the same schools, not a single case occurred in this village during the epidemic at Hollinghurst and Bower's row. I frequently visited the schools and asked the teachers to exclude all children from infected houses, and also to immediately send home any children who shewed signs of sore throat, feverishness, &c. I think great credit is due to them for the manner in which they carried this out, and I believe that had these schools been closed children from non-infected houses would have come in contact much more with children from houses where the disease existed, and the epidemic would have been even more severe.

Bills have been posted in various parts of the district stating the precautions to be taken on the occurrence of a case of infectious disease and the penalties for wilfully exposing such sufferers.

The only means of stopping the spread of the disease is—

- (1) By strict isolation during the whole period of the case.
- (2) By the exercise of care on the part of those nursing the patient not to spread it by their own clothing. This is best carried out by wearing a large overall when in the patient's room. The necessary materials for washing the nurse's hands can be placed outside the bedroom door.
- (3) By thorough disinfection of the room at the end of the case and all articles that have become infected.

190 of the cases, or nearly two-thirds of the total number, were treated in the hospital; many more of the parents would have been glad for their children to go had there been sufficient room. Ten cases terminated fatally. In most instances this was not due to the severity of the disease itself, but to some of its complications. The

cases on the whole have been of a mild type, and it has generally been noticed that when the prevalence is greatest the average severity of the attacks is least.

TYPHOID FEVER.

There have been 33 cases this year, as compared with 51 in 1902. Three of the cases occurred in one family at Garforth, the two latter doubtless arising from the insufficient care in nursing the first before his removal to hospital. A small outbreak of seven cases occurred in Lock Lane in September.

DIPHThERIA.

Only six cases have been reported, three being from Tadcaster in January. These were the last of a series which commenced in the previous year. This council provides antitoxin, and any medical practitioner applying to me can have a supply at once.

The County Council undertake free of charge the bacteriological examination of specimens from cases of suspected diphtheria, typhoid, or tuberculosis.

During the year 6 specimens have been sent, 4 from suspected cases of typhoid, 1 from diphtheria, and 1 tuberculosis.

OTHER INFECTIOUS DISEASES.

In November a number of cases of whooping cough and chicken-pox occurred at Garforth. On December 4th I recommended closure of the infant department of the Parish School for three weeks.

About this time a similar epidemic broke out at Sherburn, necessitating closure of the schools from December 14th for 3 weeks.

The district has been singularly free from measles the whole year, and it will be seen from the table at the end of the report that no death from this cause has been recorded.

GARFORTH HOSPITAL.

Owing to the severe epidemic of scarlet fever the wards have been full all through the year. 190 of these cases have been treated in the institution, of which nine proved fatal. Eleven cases of typhoid fever have also been treated in the hospital. Formerly there was some difficulty in persuading parents to allow their children to be removed to hospital, now they look upon it as a privilege to which they are entitled.

It has been very difficult this year to find accommodation for so large a number of patients, and I asked this Council to consider the advisability of providing more wards for the treatment of scarlet fever. A small committee visited the hospital and recommended that if the ground could be purchased the extension should be of a permanent nature. Two wards, a kitchen, and more accommodation for the nurses are required.

During the year a steam disinfecter has been erected, and adjoining it a bath-room and dressing room for patients' use immediately before discharge. A new ambulance of the latest pattern has also been purchased.

I ought to mention that several times cases of scarlet fever have been notified from the houses to which hospital patients had returned a few days previously. This might seem to indicate that the patients had not sufficiently recovered or that the disinfection of clothes was imperfectly carried out. I feel confident that it is not due to the former cause, for the children had generally been in hospital 8 or 9 weeks, and peeling had ceased for a considerable time. It also seems unlikely that with a new disinfecter of the latest type, and all the instructions as to its use being carefully carried out, that it is due to the latter cause. I believe it is owing to the want of more accommodation in the hospital. The convalescent patients have to mix with acute cases until the day of their discharge, and then the bathing and disinfecting to which they can be subjected is insufficient to destroy the infection which clings to their skin, hair, etc. Some years ago the same thing was reported in Manchester, and it was only by providing a separate ward which the convalescents could occupy for ten days or a fortnight before their discharge that these return cases were prevented.

SANITATION.—WATER SUPPLY.

The works of water supply for Tadcaster are now complete and some of the houses are already connected. I have analysed a number of samples from the local wells, and in almost every case the quality is bad. There is now no excuse for not remedying this state of affairs. The boring at Kiddall Lane in the Barwick Parish has been carried to a depth of 84 feet. A well is now being made. It is hoped by this means to obtain a plentiful supply for the Parishes of Barwick-in-Elmet and Garforth, and possibly other parts of the district. In December, 1902, complaints were made of the scarcity and inferior quality of the water in Ledstone. The cement lining of the well supplying the village pump was found to be cracked and allowed surface washings to enter. This has been repaired and a ditch running near has been piped for a distance of 50 yards. Since then the supply has been further augmented by laying a pipe into the village from the spring supplying Ledstone Hall.

SEWERAGE.

The Sewerage Works for Garforth were sanctioned by the Local Government Board, and the work is now proceeding. At Allerton Bywater an Inquiry was held in regard to the proposed new scheme. Evidence was then given that owing to colliery workings the land was liable to subsidence. On these grounds the Local Government Board refused to sanction the loan, and asked the Council to find another site for sewage disposal works.

In June an Inquiry was held at Kippax into the proposed extension of the sewerage and sewage disposal works. The Board suggested some alterations of the latter, but the matter has not been finally settled. At present the sewage from the part of the village known as Leeds Lane runs directly into the stream, and that from a considerable number of houses in Preston Lane discharges into a cesspool, the overflow from which is into a ditch. As this is quite near the houses considerable nuisance results, especially in summer time.

The sewerage of Sherburn is still in an unsatisfactory state. The upper portion of the village drains into a pit or open porous cesspool on the allotment ground, causing great nuisance, especially in summer, and polluting soil and underground water.

The greater part of the village sewage is treated by broad irrigation on 5 acres of land. This requires more supervision.

The drainage from fourteen cottages near the station runs into a cesspool, the overflow from which discharges into a ditch, and eventually reaches the Selby Dam. The Council propose to construct a large cesspool for these houses and have it emptied regularly.

The Tadcaster sewerage works have made slow progress during the year, partly owing to the difficulty in constructing the sewer under the river, owing to the frequent floods.

FACTORIES AND WORKSHOPS.

These have all been inspected regularly during the year. The workshops have been found clean and in good condition with sufficient air space and ventilation. There are 16 registered in the district, of which 9 are in Tadcaster. There are no retail bakehouses and no known outworkers in the district.

Details of other sanitary work will be seen in the Inspector's Reports.

I am, Gentleman,

Your obedient Servant,

BERNARD STEDMAN,

M.D. (Lond.),

Medical Officer of Health.

TADCASTER RURAL DISTRICT COUNCIL

(WESTERN DIVISION).

Number of house to house Inspections made ...	...	...	1,231
Do. New Buildings Inspected during year ...	...	...	218
Do. Inspections made to Slaughter Houses ...	...	...	41
Do. do. Dairies and Cow Sheds ...	...	...	172
Do. do. Lodging Houses ...	...	...	3
Do. do. Canal Boats ...	...	...	10
Do. Inspections connected with Zymotic Diseases ...	...	...	334
			2,004
Number of Nuisances found requiring abating ...	...	...	415
Notices served—229. Nuisances abated ...	...	...	305
Not abated at the end of year ...	...	...	110
Nuisances reported to Council 42 and noticed, arrears 21 ...	...	...	63
Abated after noticed by Council ...	...	...	45
Outstanding at end of year ...	...	...	18

TABLE OF WORK DONE.

New Drains laid to old property—length in yards ...	...	...	1341
New Sink Pipes fixed, 45 ; Gullies, 90. Total ...	...	...	135
Old Trap Gullies repaired and Sinks ...	...	...	310
Old Drains Cleaned and Repaired—yards ...	...	...	2827
Open Stagnant Water Courses cleaned—yards ...	...	...	223
New Privies and Ashpits built ...	...	...	29
Old Privies and Ashpits repaired ...	...	...	50
Do. do. removed—not fit for use ...	...	...	41
New Water Closets provided and repaired ...	...	...	13
No. of Privies and Ashpits emptied after noticed ...	...	...	309
Cesspools made new ...	...	...	8
Cesspools Cleansed after noticed ...	...	...	28
Houses Lime-Washed, 12 ; after fever cases, 334. Total ...	...	...	346
Houses found Overcrowded and abated ...	...	...	4
Houses Repaired after owners noticed ...	...	...	37
Houses closed by Owner—not fit for occupation ...	...	...	6
Pigsties found too near house and removed ...	...	...	3
Manure Heaps do. do. ...	...	...	2

New Wells Sunk, 3; Water laid to Houses 5 from main	...	...	...	8
Old Wells Cleansed and Pumps Repaired	...	...	...	21
Rainwater Tanks Cleansed and Repaired	...	...	...	4
Cowsheds Inspected, 155; Cleansed, 10; Repaired, 7.	Total			172
New Urinals built and provided	...	...	...	9
Other Nuisances abated	...	...	...	71
Factories and Workshops (inspections)	...	...	...	21

SCAVENGING DEPARTMENT.

The following work reported has been carried out by the Scavenging Contractors during the year, and number of nightsoil, ashes, and other refuse removed :—

ALLERTON BYWATER.				<i>No. of loads.</i>		
Thomas Charlesworth, Lock Lane District	...	...	...	1253	}	3,086
Wm. Lawton, Allerton Village	...	...	...	1833		
BARWICK-IN-ELMET.						
Geo. W. Schofield, The Village Ward	...	...	...	227	}	946
J. W. Howard, Scholes Ward	...	...	...	118		
Aaron Muscroft, Cross Gates Ward	...	...	...	391		
W. S. Marshall, Cross Gates Ward	...	...	...	210		
GARFORTH.						
Henry Walker, Garforth	...	...	...	899	}	1259
Henry Walker	...	...	Pails and Boxes	360		
KIPPAX.						
John Freeman, North and South	...	...	...	1848		1848
NEWTON VILLAGE.						
Thomas E. Makin, Newton	...	...	...	...		120
				Total	...	7,252

BUILDING BYELAWS.

The following is the detail of the work approved by the Building and Sanitary Committees during the year 1903 :—

Number of New Houses submitted and approved	...	...	64
Do. other Buildings	do.	...	42
Do. New Houses occupied during year	...	...	51
Do. other Buildings	do.	...	19
New Sink Pipes fixed for the above	do.	...	56
New Gully Traps	do.	...	79
New Drains laid to Sewers, &c.—length in yards	...	...	1,436
and New Air Shafts fixed.			

HODGSON DENHAM.

TADCASTER RURAL DISTRICT COUNCIL

(EASTERN DIVISION).

New Drains laid (No. of yards) ...	...	...	...	...	1,669
House Drains disconnected ...	...	...	...	...	8
New Sink Pipes Fixed and Trapped ...	...	...	...	...	4
New Trap Gullies provided ...	...	...	...	...	69
Old Drains repaired (No. of yards) ...	...	...	...	...	44
Open Water Courses cleaned out (No. of yards) ...	...	...	...	...	1,075
New Privies and Ashpits built ...	...	...	...	...	50
Old Privies and Ashpits repaired ...	...	...	...	...	40
Old Privies and Ashpits removed ...	...	...	...	...	11
Privies converted to W.C.'s ...	...	...	...	...	5
Privies and Ashpits cleansed ...	...	...	...	...	5
Cesspools made new ...	...	...	...	...	3
Houses Whitewashed or Stoved ...	...	...	...	...	1
Houses Overcrowded and Abated ...	...	...	...	...	3
Houses Repaired and Ventilated ...	...	...	...	...	4
Manure Heaps removed ...	...	...	...	...	1
New Wells Sunk and Pumps Fixed ...	...	...	...	...	1
Wells Cleaned Out and Pumps Repaired ...	...	...	...	...	4
Rain Water Tanks made and Repaired ...	...	...	...	...	4
Cowsheds and Dairies inspected ...	...	...	...	...	90
Cowsheds and Dairies Whitewashed ...	...	...	...	...	56
Cowsheds and Dairies—Structural Alterations ...	...	...	...	...	3
Urinals ...	...	...	...	...	2
Other Nuisances Abated ...	...	...	...	...	25
Lodging Houses (inspections) ...	...	...	...	...	28
Slaughter Houses (inspections) ...	...	...	...	...	108
Inspections of New Buildings ...	...	...	...	...	84
W.C.'s to New Buildings ...	...	...	...	...	6
Inspections made (house to house) Tadcaster, East ...	...	...	...	...	287
Do. do. Sherburn ...	...	...	...	...	393

H. M. DRIVER.

TABLE I.

Vital Statistics of Whole District during 1903 and previous Years. Name of District, TADCASTER RURAL.

Y EAR .	Popula- tion estimated to Middle of each year	B IRTHS .		T OTAL D EATHS R EGISTERED I N T HE D ISTRICT .				T OTAL D EATHS I N P UBLIC I NSTITUTIONS I N T HE D ISTRICT .	D EATHS O F N ON - r ESIDENTS I N P UBLIC I NSTITUTIONS I N T HE D ISTRICT .	D EATHS O F R ESIDENTS R EGISTERED I N P UBLIC I NSTITUTIONS B EYOND T HE D ISTRICT .	N ETT D EATHS A T A L L A GES B ELONGING T O T HE D ISTRICT .	
		N UMBER .	R ATE .*	U NDER 1 Y EAR O F A GE .		A T A L L A GES .					N UMBER .	R ATE .*
				N UMBER .	R ATE P ER 1000 B IRTHS R EGISTERED	N UMBER .	R ATE .					
1895	27,130	924	34·0	130	139	482	17·7	13			482	17·7
1896	27,430	856	31·2	116	135	487	17·7	16			487	17·7
1897	27,700	944	34·0	149	187	501	18·2	28			501	18·2
1898	28,000	951	34·1	143	150	492	17·5	17			492	17·5
1899	28,550	941	33·0	114	121	479	16·8	23			479	16·8
1900	29,000	955	33·0	137	143	524	18·0	15		1	525	18·1
1901	29,515	975	33·0	136	139	466	15·7	21		2	468	15·8
1902	30,050	937	31·2	126	134	480	15·9	26		6	486	16·0
Averages for years 1895-1902	28,422	935	32·9	131	140	489	17·2	20			490	17·2
1903	30,500	983	32·2	126	128	466	15·2	29	4	18	480	15·7

* Rates in Columns 4, 8, and 13 calculated per 1,000 of estimated population.

Area of District in acres (exclusive of area covered by water)	{	Total population at all ages	...	...	29,507
		Number of inhabited houses	...	...	6,169
		Average number of persons per house	...	...	4·7

At Census of 1901.

TABLE II.
Vital Statistics of separate Localities in 1903 and previous years.
Name of District, TADCASTER RURAL.

NAMES OF LOCALITIES.	ABERFORD.				TADCASTER.				SHERBURN.			
	Population esti- mated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.	Population esti- mated to middle of each year.	Births registered.	Deaths at all ages.	Deaths under 1 year.
YEAR.												
1898	17500	641	326	101	6442	191	89	31	4058	119	60	11
1899	18000	663	293	78	6490	173	113	23	4060	105	50	13
1900	18400	647	324	93	6540	184	116	25	4060	124	85	19
1901	19053	672	315	98	6541	178	93	23	3921	125	58	15
1902	19600	659	313	95	6574	166	107	16	3876	112	66	15
Averages of Years 1898 to 1902.		656	314	93		178	103	24		117	64	15
1903	20000	692	300	90	6600	163	108	18	3900	128	72	18

TABLE IV.—Causes of, and Ages at, Death During Year 1903.
Name of District, TADCASTER RURAL.

CAUSES OF DEATH.	DEATHS IN OR BELONGING TO WHOLE DISTRICT AT SUBJOINED AGES.							DEATHS IN OR BELONGING TO LOCALITIES (AT ALL AGES).			TOTAL DEATHS IN PUBLIC INSTITUTIONS IN THE DISTRICT
	All ages.	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 25.	25 and under 65.	65 and upwards.	Aberford.	Tadcaster.	Sherburn.	
Small-pox	1	...	...	...	...	1	...	1	...	...	5
Measles	...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever	10	...	6	4	...	...	...	10	...	...	9
Whooping Cough	5	2	2	1	...	...	...	4	1	...	...
Diphtheria and Mem- branous Croup }	...	...	...	...	...	...	...	...	...	...	...
Croup	...	...	...	...	...	...	...	...	...	...	...
Fever { Typhus	...	...	...	...	...	...	...	...	...	...	...
{ Enteric	5	...	...	1	1	3	...	3	...	2	1
{ Other continued	...	...	...	...	...	...	...	...	...	...	...
Epidemic Influenza	...	...	...	...	...	...	...	...	...	...	...
Cholera	...	...	...	...	...	...	...	...	...	...	...
Plague	...	...	...	...	...	...	...	...	...	...	...
Diarrhœa	11	11	...	...	...	...	...	10	...	1	...
Enteritis	8	4	2	...	...	...	2	4	2	2	...
Puerperal Fever	...	...	...	...	...	...	...	...	...	...	...
Erysipelas	1	...	...	...	...	1	...	1	...	...	...
Other Septic Diseases	21	5	5	2	3	4	2	14	4	3	1
Phthisis	28	...	1	...	6	20	1	15	6	7	1
Other Tubercular Diseases }	24	10	6	3	1	4	...	19	3	2	...
Cancer, Malignant Disease }	35	...	...	...	...	27	8	26	5	4	1
Bronchitis	34	9	11	...	...	4	10	20	11	3	...
Pneumonia	33	10	10	1	...	6	6	18	6	9	1
Pleurisy	2	...	...	...	...	...	2	1	1	...	1
Other Diseases of Res- piratory Organs }	10	...	1	1	1	2	5	8	1	1	...
Alcoholism Cirrhosis of Liver }	7	...	...	...	...	5	2	4	2	1	...
Venereal Diseases	2	...	...	...	...	2	...	1	...	1	1
Premature Birth	20	20	...	...	...	...	...	11	5	4	...
Diseases and Accidents of Parturition }	1	...	...	...	1	...	...	1	...	...	...
Heart Diseases	35	2	...	2	3	17	11	21	8	6	...
Accidents	18	1	2	1	4	9	1	11	4	3	...
Suicides	1	...	...	...	...	1	...	...	...	1	...
All other causes	168	52	10	2	1	42	61	97	49	22	9
All causes	480	126	56	18	21	148	111	300	108	72	30

In recording the facts under the various headings of Tables I., II., III., and IV., attention has been given to the notes on the Tables.

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